

NEW OR ADDITIONAL LONG TERM CARE BED APPLICATION*

Applicant's Completeness Checklist and Table of Contents

Project Name Alexian Brothers Sherbrooke Village	No. 4452 NS
Project Description Add 12 SNF Beds	
Done Page N/A Description of CON Rulebook Contents	
Divider I. Application Summary: 1.2	
Divider II. Proposal Description:	
 ✓ 7-9	ject. d to the DHSS. to purchase. vice area. cosal would address. and utilization w LTC beds. ion. acluded in planning this rovide input.
Divider III. Service Specific Criteria and Standards: 50,21,51-52 1. For ICF/SNF beds, address the population-based bed need me (53) beds per one thousand (1,000) population age sixty-five (65) at (53) beds per one thousand (1,000) population age sixty-five (65) at (16) beds per one thousand (1,000) population age sixty-five (16) beds per one thousand (1,000) population age sixty-five (16) beds per one thousand (1,000) population age sixty-five (16) beds per one thousand (1,000) population age sixty-five (16) beds such any alternate need methodology used to determine beds such as LTCH, Alzheimer's, mental health or other special acquired human immunodeficiency syndrome (AIDS) provides need for the type of beds being proposed.	end older. ethodology of ty-five (65) and older. the need for additional alty beds. usively for persons with
Divider IV. Financial Feasibility Review Criteria & Standards	
 Document that the proposed costs per square foot are reason the latest "RS Means Construction Cost data". Document that sufficient financing is available by providing a institution or an auditors statement indicating that sufficient Provide Service-Specific Revenues and Expenses (Form MO 58 three (3) years, and projected through three (3) years beyond years are derived. Document how patient charges were derived. Document responsiveness to the needs of the medically indiges *Use for RCF/ALF, ICF/SNF and LTCH beds	able when compared to letter from a financial funds are available. 0-1865) for the latest project completion.

Certificate of Need Application

Project No. 4452 RS

Alexian Brothers Sherbrooke Village

Add 12 SNF Beds

Submitted to:

Missouri Health Facilities Review Committee

Divider I. Application Summary

1. Applicant Identification and Certification (Form MO 580-1861)

Attached.

2. Representative Registration (Form MO 580-1869)

Attached.

3. Proposed Project Budget (Form MO 580-1863) and detail sheet.

Attached.



APPLICANT IDENTIFICATION AND CERTIFICATION

(must m	atch the Letter of Intent for this pro	oject, without e	exception)			
1. Project Location (a	ittach additional pages as necessary to identify m	ultiple project sites.)			
Title of Proposed Project Alexian Brothers Sherbrooke Ville	age-12 SNF Bed Expansion		Project Number 4452 NS			
Project Address (Street/City/State/Zip Code) 4005 Ripa St. Louis, MO 63125						
2. Applicant Identific	ation (information must agree with previou	sly submitted Lette	r of Intent)			
List All Owner(s): (list corpore	ate entity) Address (Street/City/Sta	te/Zip Code)	Telephone Number			
Alexian Brothers Sherbrooke Village	4005 Ripa, St. Louis, MO 63125		314-544-1111			
List All Operator(s): (list ent	tity to be d or certified) Address (Street/City/St	ate/Zip Code)	Telephone Number			
Alexian Brothers Sherbrooke Village	4005 Ripa, St. Louis, MO 63125		314-544-1111			
3. Ownership (Check applic	able category)					
Nonprofit Corporation	n 🗌 Individual 🔲 (City	District			
Partnership	Corporation (County	Other:			
4. Certification:						
In submitting this project a	application, the applicant underst	ands that:				
	nade as to the community need fo	or the propose	ed beds or equipment in this			
application; (B) In determining com	munity need, the Missouri Health	n Facilities Re	eview Committee (Committee)			
will consider all sin	nilar beds or equipment within; Certificate of Need (CON) by the Co					
Rules and CON sta		•				
project six (6) mont	ths after the date of issuance, unl					
	x (6) months; provided to the CON Program sta nay not be transferred, relocated,					
Committee.	101000000,	or 1110 am 10 a	acopt with the consolit or the			
We certify the information and data in this application as accurate to the best of our knowledge and belief by our representative's signature below:						
5. Authorized Contac	t Person (attach a Contact Person Correc	tion Form if differen	t from the Letter of Intent)			
Name of Contact Person		Title				
Richard D. Watters Telephone Number	Fax Number	Attorney	F most Address			
314-621-2939	314-621-6844	i	E-mail Address dwatters@lashlybaer.com			
Signature of Contact Person			Date of Signature			
MO 580-1861 (11/06)						



REPRESENTATIVE REGISTRATION

(A registration form must be completed for each project represented)					
Project Name	Number	ber			
Alexian Brothers Sherbrooke Village	4452 NS	152 NS			
(Please type or print legibly)					
Name of Representative	Title				
Richard D. Watters	Attorney				
Firm/Corporation/Association of Representative (may be different from below, e.g., law firm, consulta	ant, other) Telephone Number	hone Number			
Lashly & Baer, PC	314-621-2939	14-621-2939			
Address (Street/City/State/Zip Code)					
714 Locust Street St Louis, MO 63101					
Who's interests are being represented? (If more than one, submit a separate Representative Registration Form for	or each.)				
Name of Individual/Agency/Corporation/Organization being Represented	Telephone Number	ohone Number			
Alexian Brothers Sherbrooke Village	314-544-1111	14-544-1111			
Address (Street/City/State/Zip Code)					
4005 Ripa					
St. Louis, MO 63125					
Check one. Do you: Relationship to Pr	roject:				
✓ Support None					
☐ Oppose ☐ Employee ☐ Legal Court	sel .				
Neutral Consultant	t .				
Lobbyist					
Other information: Other (expl	lain):				
<u> </u>					
I attest that to the best of my belief and knowledge the testimony is truthful, represents factual information, and is in compliance we have person who is paid either as part of his normal employment or any project before the health facilities review committee shall regist chapter 105 RSMo, and shall also register with the staff of the heal every project in which such person has an interest and indicate who opposes the named project. The registration shall also include the person, firm, corporation or association that the person registering named project. Any person violating the provisions of this subsection penalties specified in §105.478, RSMo.	with §197.326.1 RSMo which says: as a lobbyist to support or oppose ter as a lobbyist pursuant to lth facilities review committee for mether such person supports or mames and addresses of any represents in relation to the	Mo which says: oport or oppose suant to committee for supports or es of any n to the			
Original Signature	1422/09	27/09			

3



REPRESENTATIVE REGISTRATION

(A registration form must be completed for each project represented)						
Project Name Alexian Brothers Sherbrooke Village	Number 4452 NS					
(Please type or print legibly)						
Name of Representative Margaret C. Scavotto	Title Attorney					
Firm/Corporation/Association of Representative (may be different from below, e.g., law firm, consultant Lashly & Baer, PC	Telephone Number 314-621-2939					
Address (Street/City/State/Zip Code) 714 Locust Street St Louis, MO 63101	-					
Who's interests are being represented? (If more than one, submit a separate Representative Registration Form for	each.)					
Name of Individual/Agency/Corporation/Organization being Represented Alexian Brothers Sherbrooke Village	Telephone Number 314-544-1111					
Address (Street/City/State/Zip Code) 4005 Ripa St. Louis, MO 63125						
Check one. Do you: Support Oppose Neutral Neutral Other information: I attest that to the best of my belief and knowledge the testimony aris truthful, represents factual information, and is in compliance with	el in): and information presented by me in \$197.326.1 RSMo which says:					
Any person who is paid either as part of his normal employment or a any project before the health facilities review committee shall registe chapter 105 RSMo, and shall also register with the staff of the health every project in which such person has an interest and indicate whe opposes the named project. The registration shall also include the na person, firm, corporation or association that the person registering re named project. Any person violating the provisions of this subsection penalties specified in §105.478, RSMo.	s a lobbyist to support or oppose r as a lobbyist pursuant to n facilities review committee for ther such person supports or mes and addresses of any presents in relation to the					
Origina Signature	Date 14 Dec. 2009					



PROPOSED PROJECT BUDGET

<u>D</u>	escription	<u>Dollars</u>	
CC	OSTS:*		
1.	New Construction Costs ***	\$2,434,559	
2.	Renovation Costs ***	0	
3.	Subtotal Construction Costs (#1 plus #2)	\$2,434,559	
4.	Architectural/Engineering Fees	\$143,199	
5.	Other Equipment (not in construction contract)	146,042	
6.	Major Medical Equipment	. 0	
7.	Land Acquisition Costs ***	0	
8.	Consultants' Fees/Legal Fees ***	6,200	
9.	Interest During Construction (net of interest earned) ***	0	
10.	Other Costs ****	0	
11.	Subtotal Non-Construction Costs (sum of #4 through #10)	\$295,441	
12.	Total Project Development Costs (#3 plus #11)	\$2,730,000	**
FIN	ANCING:		
13.	Unrestricted Funds	\$2,730,000	
14.	Bonds	0	
15.	Loans	0	
16.		0	
	Other Methods (specify)	'	
	Other Methods (specify) Total Project Financing (sum of #13 through #16)	\$2,730,000	**
17.			**
17. 18.	Total Project Financing (sum of #13 through #16)	\$2,730,000	**
17. 18. 19.	Total Project Financing (sum of #13 through #16) New Construction Total Square Footage	\$2,730,000	**

^{*} Attach additional page(s) to provide details of how each line item was determined, including all methods and assumptions used.

^{**} These amounts should be the same.

^{***} Capitalizable items to be recognized as capital expenditures after project completion.

^{****} Include as Other Costs the following: other costs of financing; the value of existing lands, buildings and equipment not previously used for health care services, such as a renovated house converted to residential care, determined by original cost, fair market value, or appraised value; or the fair market value of any leased equipment or building, or the cost of beds to be purchased.

^{*****} Divide new construction costs by total new construction square footage.

^{******} Divide renovation costs by total renovation square footage.

Proposed Project Budget Detail Sheet

- 1. New Construction Costs of \$2,434,559 were calculated using the architect's square footage calculations and knowledge of the general construction market, as well as a cost estimator from a general contractor Applicant consulted on prior projects.
- 4. Architectural / Engineering Fees. \$143,199 represents fee estimates submitted by the architect and civil engineer working on this project.
- 5. Other Equipment. \$146,042 represents the cost to purchase furniture, fixtures and equipment, as estimated by Applicant's interior design firm and internal staff.
- 8. Consultants' Fees/Legal Fees. \$6,200 represents the estimated cost of legal services for the project.

Divider II. Proposal Description

1. Provide a complete detailed project description.

Alexian Brothers Sherbrooke Village seeks to expand its 120 bed skilled nursing facility in St. Louis County. This facility currently has beds for Medicare, Medicaid, memory care, and end-of-life patients, and also provides physical, occupational, and speech therapy. There is also an 88 bed residential care facility on the campus, allowing residents to "age in place." Applicant seeks to expand its end-of-life care by adding 12 skilled nursing beds.

The Alexian Brothers have been caring for the elderly in St. Louis since 1869. In addition to the Sherbrooke Village facilities, the Alexian Brothers operate an additional skilled nursing facility; low income housing; and the only PACE (Program of All-Inclusive Care for the Elderly) program in Missouri serving low-income frail, elderly individuals.

The Alexian Brothers began their ministry of caring for the sick, aged, poor and dying, and burying individuals, during the Black Plague 800 years ago. The basic Judeo-Christian beliefs that inspired the founders of this Catholic religious congregation sustain its ministry today. This heritage is espoused by the governance, management and entire health care team throughout Alexian Brothers Health System in their mutual commitment to promote the physical, mental, spiritual and social well-being of all individuals served through the health care ministry. As shown by its mission statement, Alexian Brothers Sherbrooke Village is committed to carrying on the traditions of its Judeo-Christian founders:

Inspired by the healing mission of Jesus Christ and the Alexian Brothers' commitment to the elderly, Alexian Brothers Sherbrooke Village is dedicated to serving the spiritual, psychosocial, and physical needs of the older adults of the community with a constant striving for the highest quality care, innovative and responsible use of resources and deep and abiding regard for dignity of the individual. It is in this spirit that we respond to the needs of our residents and their families while accepting the challenges and opportunities presented by our changing society.

Sherbrooke Village's guiding principles are Dignity of the Person, Compassion, Holism, Partnership, and Care for the Poor. Applicant wants to continue to honor these principles by expanding its end-of-life care services at Sherbrooke Village. The end-of-life care will be organized in a "neighborhood" setting. Each resident will have a private one-bedroom or studio room, with a private bathroom and snack kitchen, and groups of residents will share a private entrance. All residents, or neighbors, will share a dining room, great room with fireplace, interior courtyard, chapel, and salon. The neighborhood design is more homelike, and provides greater dignity and privacy for the residents.

All end-of-life residents have access to Alexian Brothers Sherbrooke Village's spiritual care program, which includes an on-site chapel and spiritual counseling. Spiritual care is an important part of the end-of-life process, not just for the dying patient, but also for the patient's family.

Chaplain Reverend Roger Schomburg meets with families of potential residents and helps them decide if end-of-life care is the right choice. Reverend Schomburg also leads grief support groups, and provides counseling to individual patients and their families. This counseling sometimes involves mending broken relationships with family members, and helping the patient contact family and friends to tell them the patient is receiving end-of-life care.

Alexian Brothers Sherbrooke Village has received numerous awards for its unique end-of-life program. In 2003, the American Association of Homes and Services for the Aging (AAHSA) gave the facility the Community Service Award for publishing and widely distributing its "Guide to End-of-Life Issues." AAHSA commended Alexian Brothers Sherbrooke Village for its commitment to the principles that every person deserves to die with dignity, and that family and professional caregivers need better support, comfort, and understanding of end-of-life issues.

Applicant's "Highway to Heaven" program earned the 2004 Excellence in Service Award from the Missouri Association of Homes for the Aging, and the 2003 Best Practices award for Resident Dignity from the Missouri Department of Health and Senior Services. The "Highway to Heaven" program serves as a final act of dignity for the dying patient. In a nursing home, death is typically a quiet, and even a concealed, event. With "Highway to Heaven," however, the patient's death is celebrated and shared. The funeral director comes to the facility, and a procession of family, residents and staff escorts the body out of the building. "Highway to Heaven" honors the end of the patient's life. By including family, residents, and staff, these individuals are supported in their time of grief. In fact, families frequently comment to Alexian Brothers Sherbrooke Village staff that "Highway to Heaven" is a meaningful experience.

Applicant's proposed expansion is needed in order to meet the end-of-life needs of the St. Louis community. The 65-and-over population is expected to double by 2030. Applicant's occupancy has been greater than 90% for the past six quarters. When end-of-life beds become available, they are typically on hold for another individual.

End-of-life care services are "sorely needed in Missouri." See letter of support from Tom Meuser, PhD, Director of the Gerontology Graduate Program at the University of Missouri-St. Louis ("While much hospice care happens in the home, many individuals would choose inpatient hospice care to relieve close family of this burden if beds were available"). See also letters of support from Matt Brauss, RN, CHPN, who served on the Missouri Medicaid Hospice Committee (Sherbrooke Village is "at or near capacity at all times", and "over 50% of all deaths continue to occur in St. Louis area hospitals and many of them received care through emergency rooms and hospitals because alternatives are not available") and Lisa Eldridge, RN, Medicare Risk and Quality Coordinator for St. Anthony's Physician Organization ("It is my experience, from my perspective as a hospital case manager, that there is a shortage of SNF beds [at Sherbrooke Village]. The reply from the admissions liaison is frequently that there are no beds available...In working at St. Anthony's Medical Center, I find that our community lacks hospice beds as well. De Grieff hospice house at St. Anthony's Medical Center is usually on a waiting list").

¹ Due to a staffing change, occupancy data for the second and third quarters of 2009 were submitted incorrectly. Actual occupancy for both quarters was over 90%, and Applicant will send correct data to the state.

This project is also needed to provide end-of-life patients with more privacy and dignity. The limitations of the current facilities do not provide end-of-life care in the most respectful manner. Currently these patients must share a room with a roommate. This layout limits accommodating the family and friends who want to be with their loved one. The roommate's quality of life suffers knowing what is happening to the individual in the next bed. For the majority of people, watching someone die is not something they are emotionally able to handle. By transition to all private rooms, patients and their families will receive greater privacy and dignity. See letter of support from Jim Weber, Hospice Care Consultant with AmHeart Hospice ("I have been working for hospice for seventeen years and I learned that dying is a very private time for the person on hospice as well as the family. It is a time best experienced in the company of loved ones and not shared with a roommate").

2. Provide a legible city or county map showing the exact location of the proposed facility.

Attached.

3. Provide a site plan for the proposed project.

Attached.

4. Provide preliminary schematic drawings for the proposed project.

Attached. The 12 skilled nursing end-of-life care beds will be in Neighborhood 3.

5. Provide evidence that architectural plans have been submitted to the DHSS.

Please see attached letter to Tracy Cleeton, dated December 11, 2009.

6. Provide the proposed gross square footage.

The proposed square footage 12,122 square feet.

7. Document ownership of the project site, or provide an option to purchase.

See attached Real Property Tax Bill.

8. Define the community to be served.

The primary community to be served is individuals age 65 and older living in zip codes 63125, 63129, 63123, 63128, 63109, 63116, 63111, 63126, and 63119 (see attached map). Applicant is expanding its end-of-life care program so that individuals in this service area who need this care will not have to wait for a bed.

9. Provide 2015 population projections for the 15 mile service area.

See attached.

10. Identify specific community problems or unmet needs the proposal would address.

Alexian Brothers Sherbrooke Village maintains an occupancy percentage of more than 90%, and its end-of-life beds are usually full. The only facility in the community with a similar structure is also full with a waiting list. Applicant's shortage of end-of-life beds is illustrative of the shortage of such beds in the service area, and in Missouri overall (See letters of support from Tom Meuser, Matt Brauss, Lisa Eldridge, and Diane M. Smith). As a result, the typical placement of an individual needing end-of-life care is a skilled nursing facility that does not provide the level of dignity or spiritual care of an end-of-life program like the one at Alexian Brothers Sherbrooke Village. By adding beds, Applicant will be able to continue its mission and meet the needs of individuals in its community who are dying.

In addition, Applicant's current end-of-life facilities lack the privacy required to provide patients the dignity they need at the end of their lives. Because current patients share a roommate, they lack the privacy required to share the end-of-life experience with visiting families—and patients often witness the death of their roommate, which is an emotionally challenging experience. The new beds will be in private rooms, affording end-of-life patients, and their families, more privacy.

11. Provide historical utilization for each of the past three years and utilization projections through the first three years of operation.

Historical utilization

FY 2007	FY 2008	FY 2009
58,521	56,348	56,762

Projected utilization.

FY 2011	FY 2012	FY 2013
67,708	75,920	78,324

12. Provide the methods and assumptions used to project utilization.

When projecting utilization for this project, Applicant reviewed market studies completed in 2000, 2003 and 2009, along with census data, and compared this data to Applicant's historical and current utilization.

13. Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input.

Consumer preferences were included through interviews with current and discharged residents,

as well as family member surveys. Applicant also sought input from consultants, and conducted market trend analysis.

A notice of this project was also published in the Suburban Journals on November 18, 2009. A copy of the Affidavit of Publication is attached.

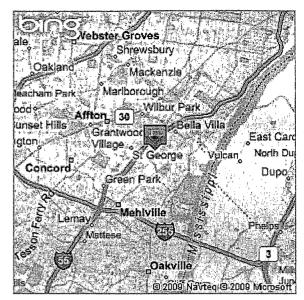
14. Provide copies of any petitions, letters of support or opposition received.

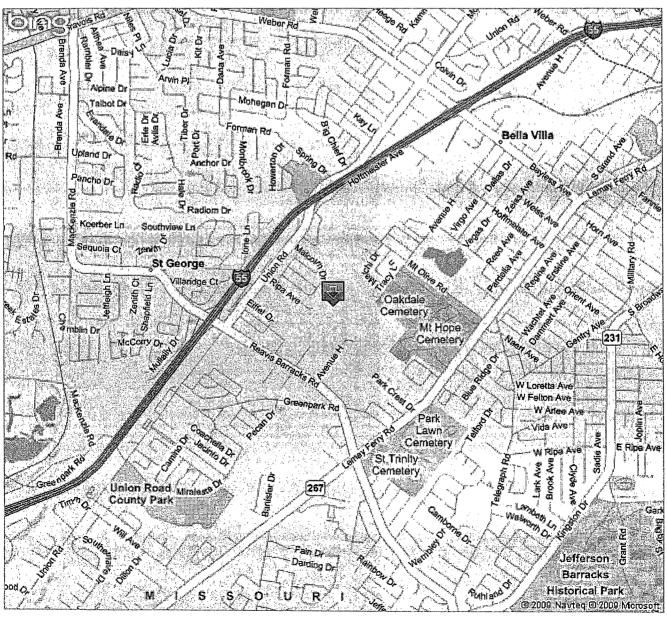
Attached. Additional letters will be forwarded when received.

Bing Maps 4005 Ripa Ave, St Louis, MO 63125-2378

My Notes	

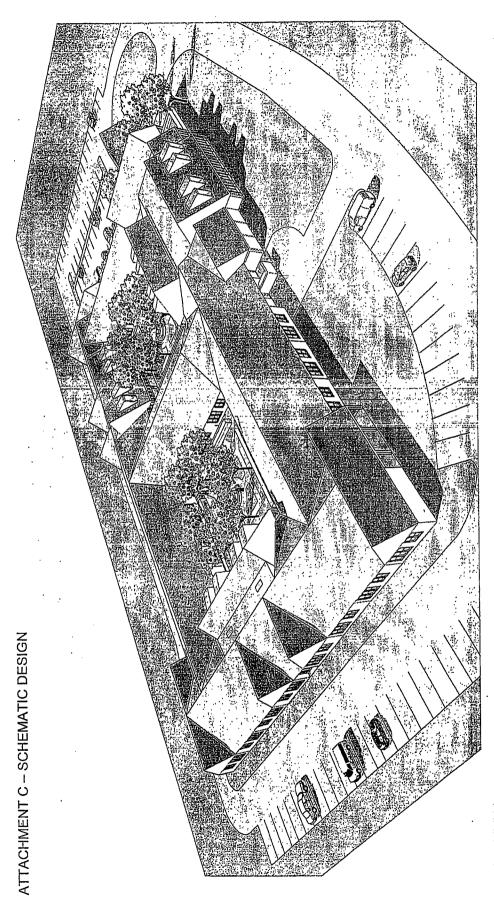
FREE! Use Bing 411 to find movies, businesses & more: 800-BING-411





ATTACHMENT C - SCHEMATIC DESIGN.

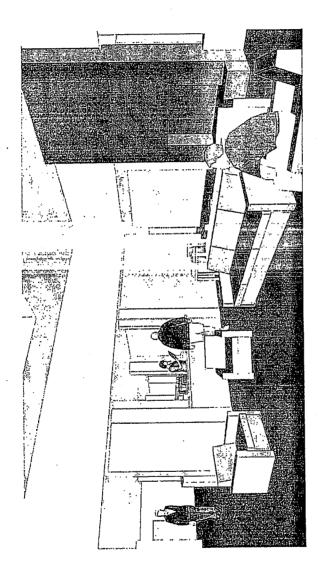
SITE PLAN scale: NTS



SITE VIEW

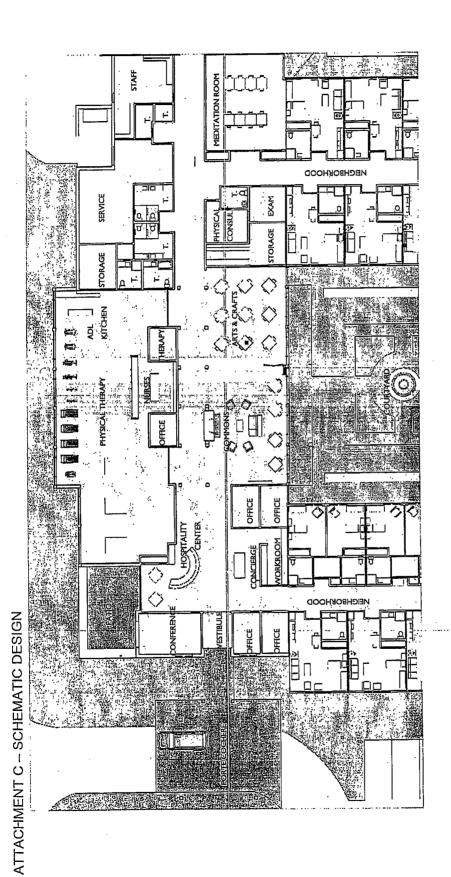
SENIOR LIVING FACILITY SCHEMATIC DESIGN

H.K. W Architects 08.007.00 October 27, 2009



ATTACHMENT C - SCHEMATIC DESIGN

NEIGHBORHOOD VIEW



WELLNESS CENTER FLOOR PLAN

Scale: 1/16" = 1'.0"

18

SENIOR LIVING FACILITY SCHEMATIC DESIGN

08.007.00 October 27, 2009 **HKW** Architects



December 11, 2009

Mr. Tracy Cleeton LSC Consultant Engineering Consultant Unit, DHSS P. O. Box 570 3418 Knipp Drive, Suite F Jefferson City, Missouri 65102-0570

Re: Alexian Brothers Sherbrooke Village

Dear Mr. Cleeton:

Enclosed you will find the schematic drawings for the expansion of Alexian Brothers Sherbrooke Village. These drawings are being submitted as part of the Certificate of Need applications for a LTC Renov./Modernization (converting 16 beds from RCF currently operating under RCF II rules to ALF), adding 12 New LTC beds (private pay hospice); and LTC Bed Expansion (purchase of 35 beds).

Please feel free to contact me if you have any questions.

Sincerely,

C. Michael Roth Administrator COLLECTOR OF REVENUE 41 S CENTRAL AVE ST LOUIS MO 63105 (314) 615-5500

ST LOUIS COUNTY, MISSOURI BEAL PROPERTY TAX BILL

0180093799

PIN 11042009 (314) 615-5500 5279 SCHOOL /SUB ADDRESS LOCATOR NUMBER 1801 AVENUE H ST SAINT LOUIS 120M 27H140181 LEGAL DESCRIPTION OWNER'S NAME BLK ALEXIAN BROTHERS SHERBROOKE VILLAGE LOT CARONDELET COMMONS BLK PT 34 LOC AT RIPA & AVENUE H

TAX DISTRIBUTION DEST CODE SCH-MEHLVILLE 2,158.27 ALEXIAN BROTHERS SHERBROOKE VILLAGE ST L COMM COLL 159.32 SPEC SCH DIST 4005 RIPA AVE 699.95 **SAINT LOUIS MO 63125-2378** FIRE-LEMAY 709.35 COUNTY HEALTH FUND 111.89 [,] [,...] [,...] [,...[,], [,...] [,...] [,...] [,...] [,...] [,...] CO. PARK MAINT. 37.30 COUNTY BOND RETIRE 20.89 ROAD & BRIDGE 78.32 SHELTERED WORKSHOP 58.93 COUNTY GENERAL 141.72 ST. OF MISSOURI 22.38 TAX RATE SPECIAL ASSESSMENTS MET ZOO MUS DIST 185.95 TYPE ASSESSED VALUE COUNTY LIBRARY 121.57 6.0408 74,590 COMMERCIAL 1,268.03 SURCHARGE SURCHARGE 1.7000 74,590 8990 900 MO law 139.100, 52.290 mandates the assessment of interest of 2% per month or any part thereof, plus a TAX AMOUNTS 2% penalty for all taxes 4.505.84 CURRENT TAX AMOUNT unpaid by 12 midnight SURCHARGE AMOUNT 1,268.03 December 31 of tax year. In compliance with State statutes 139.100 payments by mail require "postmark" by United States Postal Service on or before December 31. 5,773.87 TOTAL DUE

rebili 10/07/08

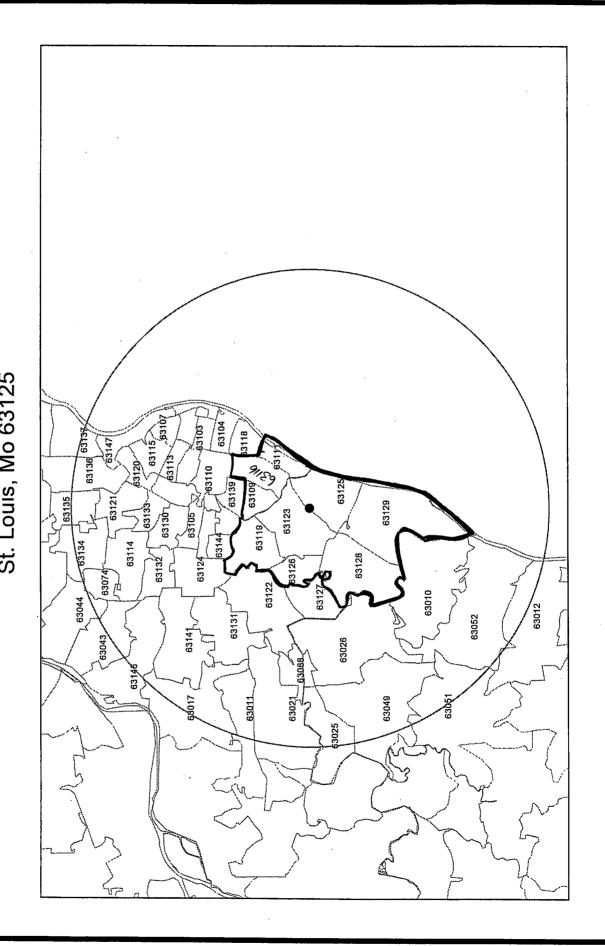
Pay taxes online at <u>www.stlouisco.com</u> by authorizing direct debit to your checking/savings account, or by credit card. Credit card payments can also be made by calling: 1-877-309-9306. A "convenience fee" may apply.

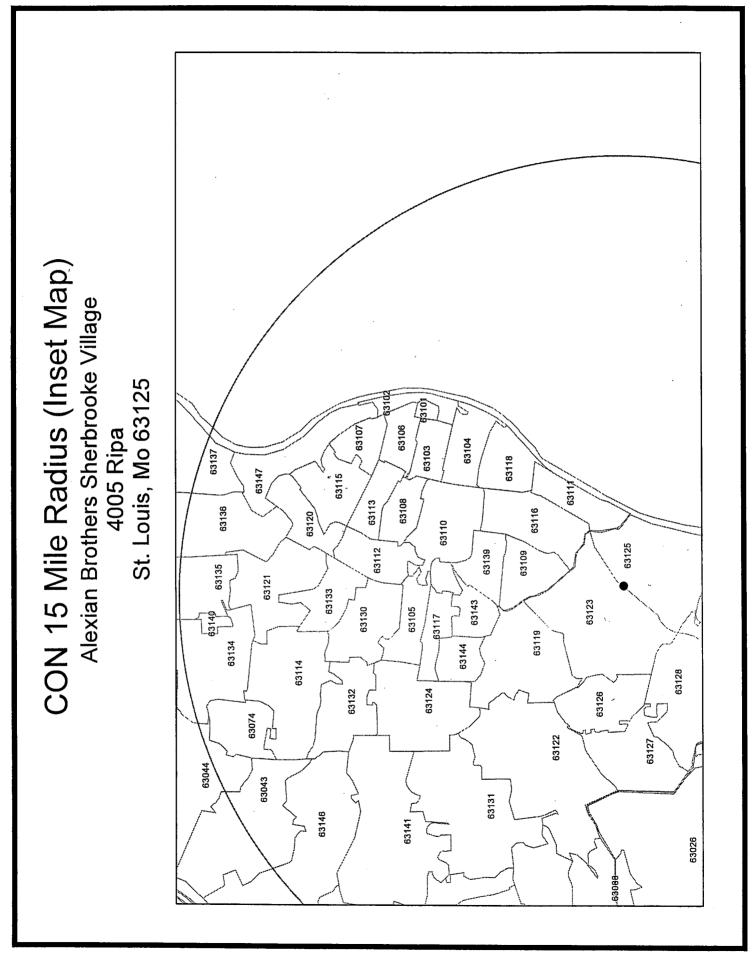
TEAR HERE AND RETURN LOWER PORTION WITH PAYMENT

LOCATOR NUMBER	SCHOOL/SUB	CITY	DEST	72	LOUIS CO	INTV	MISSOI	I 191	1							2000
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VALUATION	TYPE	X	RATE PER \$1	00 = CURRENT TAX +	INTEREST	+ PEN	IALTIES	+	SPE	CIAL AS	SMT =				3219	_
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CON 15 Mile Radius

Alexian Brothers Sherbrooke Village 4005 Ripa St. Louis, Mo 63125





CON 15 Mile Radius (City Map) Alexian Brothers Sherbrooke Village 4005 Ripa St. Louis, Mo 63125 Armold

63010 Jefferson 42,934 5,713 63012 Jefferson 11,306 957 63049 Jefferson 15,706 1,511 63051 Jefferson 16,029 1,552 63052 Jefferson 24,180 2,054 63101 St. Louis City 1,306 348 63102 St. Louis City 2,198 183 63103 St. Louis City 3,847 727 63104 St. Louis City 19,475 1,412 63106 St. Louis City 10,901 1,211 63108 St. Louis City 23,020 3,089 63109 St. Louis City 20,208 1,707 63111 St. Louis City 20,208 1,707 63111 St. Louis City 23,924 3,062 63112 St. Louis City 11,112 1,746 63115 St. Louis City 23,174 3,655 63116 St. Louis City 23,014 3,655 63116 St. Louis City 23,014 3,655 63116 St. Louis City 23,014 3,655 63116 St. Louis City 23,0174 3,655 63116 St. Louis City 23,0174 3,655 63116 St. Louis City 23,0174 3,655 63117 St. Louis City 24,091 2,342 63120 St. Louis City 32,091 2,342 63120 St. Louis City 10,805 1,128 63139 St. Louis City 10,805 1,128 63139 St. Louis City 10,805 1,128 63021 St. Louis City 15,610 1,650 63021 St. Louis Co 58,784 5,133 63025 St. Louis Co 43,596 3,607 63011 St. Louis Co 40,635 6,646 63043 St. Louis Co 13,777 1,311 63026 St. Louis Co 13,777 1,311 63026 St. Louis Co 13,748 2,506 63043 St. Louis Co 13,748 2,506 63044 St. Louis Co 10,782 1,266 63105 St. Louis Co 10,782 1,266 63105 St. Louis Co 20,648 2,559 63140 St. Louis Co 32,411 7,187 63121 St. Louis Co 32,411 7,187 63122 St. Louis Co 32,411 7,187 63123 St. Louis Co 32,411 7,187 63124 St. Louis Co 32,411 7,187 63125 St. Louis Co 32,411 7,187 63126 St. Louis Co 32,411 7,187 63127 St. Louis Co 32,684 4,014 63131 St. Louis Co 52,838 6,804 63131 St. Louis Co 52,838 6,804 63131 St. Louis Co 52,838 6,804 63131 St. Louis Co 64,951 11,994 63124 St. Louis Co 65,838 6,804 63135 St. Louis Co 66,059 743 63134 St. Louis Co 66,059 743 63134 St. Louis Co 66,059 743 63136 St. Louis Co 66,059 743 63137 St. Louis Co 66,059 743 63134 St. Louis Co 66,059 743 63136 St. Louis Co 66,059 743 63137 St. Louis Co 66,059 743 63130 St. Louis Co 66,059 743 63131 St. Louis Co 66,059 743	ZIP	County	Tot. Pop	65+
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ZIP	County	City	Tot. Pop	65÷
63010	Jefferson	Arnold city	21,227	3,436
63052	Jefferson	Arnold city	See Above	See Above
63049	Jefferson	Byrnes Mill city	3,402	345
63051	Jefferson	Byrnes Mill city	See Above	See Above
63052	Jefferson	Kimmswick city	113	31
63049	Jefferson	Parkdale village	196	34
Totals			24,938	3,846

1128							1128	In	63120
2342							2342	In	63118
6282							6282	lu]	63116
3655							3655	In	63115
1746							1746	In	63113
2290							2290	lnl	63112
3062							3062	. In	63111
1707							1707	In	63110
5404							5404	In	63109
3089							3089	uI	63108
1211							1211	luI	63107
722			-	,			722	uI	63106
1412							1412	In	63104
727							727	nl	63103
183							183	In	63102
348							348	lnl	63101
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4014				4014	In	63130
6804				6804	In	63129
6802				6802	In	63128
1222				1222	in	63127
3676				3676	In	63126
7005				7005	lnl	63125
2880				2880	In	63124
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7187				7187	In	63119
1473				1473	In	63117
5465				5465	In	63114
2130				2130	In	63105
1266				1266	In	63088
2506				2506	In	63074
221		10%		2206	Overlap	63044
1280		50%		2559	Overlap	63043
5188		60%		8646	Overlap	63017
3055		50%		6109	Overlap	63011
3607	-			3607	In	63026
787		60%		1311	Overlap	63025
4106		80%		5133	Overlap	63021
1650				1650	In	63147
3823				3823	In	63139

167504				:		-
3855		70%		5507	Overlap	
1315				1315	In	63144
1028				1028	in	63143
4013				4013	In	63141
64				64	In	63140
1121		30%		3735	Overlap	63137
2971		50%		5942	Overlap	
1910		60%		3183	Overlap	

ST. LOUIS POST-DISPATCH

AFFIDAVIT OF PUBLICATION

LASHLY & BAER, P.C. 714 LOCUST STREET ATTN: DIXIE ST. LOUIS, MO 63101

AD # 1192161

THE ATTACHED ADVERTISEMENT WAS PUBLISHED IN THE SUBURBAN JOURNALS ON THE FOLLOWING DATES:

WEDNESDAY, NOVEMBER 18, 2009

Alexian Brothers
Sherbrooke Village is seeking Certificate of Need approval from the Missouri Health Eacilities Review Committee for the addition of 12 skilled nursing beds for hospice care to its facility at 4003 Ripa, 5t Louis Missouri 63125 Comments or questions about his matter, should be addressed to Richard D. Waterss Lashiy & Baer, P.C. 714 Locus Street, St. Lusis Missouri 63101.

COMPANY REPRESENTATIVE

SWORN TO AND SUBSCRIBED BEFORE ME THIS November 23, 2009.

1HIS November 23, 2009.

NOTARY PUBLIC, CITY OF ST.LOUZ

AFFIDAVIT CHARGE \$ 5.00 EACH

MICHELLE L. SMALLEY
Notary Public, Notary Seal
State of Missouri
St. Louis City
Commission # 09402768
My Commission Expires July 25, 2013

PHONE 314-340-8000

900 N. TUCKER BLVD., ST LOUIS MO 63101-1099

CAPITOL OFFICE State Capitol 201 W. Capitol Avenue Jefferson City, MO 65101-6806 Tele: (573) 751-4298

Fax: (573) 522-2628

DISTRICT ADDRESS

4539 Valmeyer St. Louis, MO 63128 Tele: (314) 667-4402



Vicki Englund State Representative

85th District December 16, 2009

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, Missouri 65102

Dear Mr. Piper,

Alexian Brothers Sherbrooke Village will be submitting an application to expand services. I am writing in support of their application for a Certificate of Need. Part of the expansion requires the full Certificate of Need for 12 beds which are intended for hospice care. The expansion of the entire facility will create 75 new jobs.

The Alexian Brothers initial ministry was founded in St. Louis 140 years ago. Currently the Alexian Brothers have four ministries in St. Louis serving all income levels. Sherbrooke Village has been an active member of the community for the past 20 years and their facility is often at or close to full capacity. The addition of these 12 beds will allow the facility to continue and expand the ministry of the Alexian Brothers of caring for those who are aged, sick and dying for over 800 years. The expansion is based on the neighborhood concept as opposed to the current institutional physical plant allowing for a higher quality of personal life. The new setting will allow for greater individual dignity and comfort. Each resident will reside in a private room with a private bath.

Their expansion plans are greatly needed and their continued commitment to excellence is an asset to South County. I support their endeavors to continue providing a high quality living environment in our community. Thank you for your consideration and attention to this matter. Please let me know if I can be of further assistance.

Sincerely.

Representative Vicki Englund

cc: Market Watters

Lashly & Baer PC 714 Locust

St. Louis, Missouri 63101

Appropriations -Transportation & Economic Development

Small Business

Conservation and Natural Resources

Urhan Issues

E-Mail:

Vicki.Englund@house.mo.gov

December 16, 2009

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, Missouri 65102

Mr. Piper,

I am writing in support of the expansion of Alexian Brothers Sherbrooke Village, and the CON. It is my experience, from my perspective as a hospital case manager, that there is a shortage of SNF beds there. The reply from the admissions liaison is frequently that there are no beds available.

In working at St. Anthony's Medical Center, I find that our community lacks hospice beds as well. De Grieff hospice house at St. Anthony's Medical Center is usually on a waiting list. It would be welcome for a nursing home to have a wing dedicated to care of the terminally ill, with nurses well-versed in the compassionate care model, as opposed to curative model of care.

The idea of "neighborhoods" is also very appealing, as it imitates a less institutional feeling; more like home. I like the concept of "couples living" will offer a new opportunity for couples who are in differing stages of health. It will allow for the healthier, independent individual to get rest at night, while allowing trained staff to see to their spouse's needs.

The Alexian Brothers ministry is very passionate about caring for their customers as well as employees, and everyone in Sherbrooke Village that I have encountered has a very strong belief in their product/employer.

My husband's Mother spent a week in SNF in 2008, and the experience was very rewarding. I believe in them as well.

Respectfully submitted,

Maas

Lisa Eldridge, RN

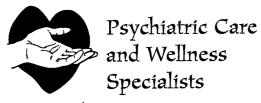
SAPO Medicare Risk and Quality Coordinator

Office: 314-525-3449 Cell: 314-494-0161

Cc: Mr. Richard Watters Lashly & Baer PC

714 Locust

St. Louis, Missouri 63101



Professionals Caring and Sharing

phone: (636) 230-4242 exchange: (314) 972-9292 6217 Mid Rivers Mall Drive, #317 St. Charles, MO 63304

December 15, 2009

Mr Richard Watters Lashly & Baer, PC 714 Locust St. Louis, MO 63131

Dear Mr. Watters,

I am writing this letter in full support of the proposed additions to Alexian Brothers Sherbrooke Village. I have provided psychiatric services at Sherbrooke Village for almost 20 years. As a provider, I have witnessed the superior care offered by nursing and therapy staff, social services, activities, pastoral care and physicians. In accordance with the mission of the Alexian Brothers, the staff at Sherbrooke Village offer care of the sick, dying, and aged. They offer dignity, healing and comfort to their residents.

Since the Middle Ages, the Alexian Brothers have provided ministry to the dying, from caring for and burying victims of the Black Plague, to providing comfort and dignity to the residents of their facilities, to the compassion and care of the recently departed in the Highway to Heaven ceremony offered at Sherbrooke Village. A hospice wing, proposed in the additions, will offer a private, peaceful environment where end of life issues can be addressed and individuals can die with dignity and comfort.

Sherbrooke Village frequently operates at or near capacity, and at times has to decline potential clients because of lack of beds. As you are fully aware, the aging population of the United States is on the rise. The CDC reports that the number of persons aged 65 or older is expected to increase from approximately 35 million in 2000 to 71 million in 2030. As our population ages, there is a greater need for facilities offering a continuum of care such as that proposed by Alexian Brothers Sherbrooke Village.

The transition from independent living to a nursing home environment, whether it be for short-term rehabilitation, long term placement, or for hospice services, is very stressful for the resident and his loved ones. The proposed addition to Alexian Brothers Sherbrooke Village will make this transition easier as it offers private rooms in a home-like setting, using a neighborhood concept. There are clients who need more than Residential Care, but who are not ready for Skilled Care. In these additions, Sherbrooke Village will meet the need of those individuals.

It is clear that Alexian Brothers Sherbrooke Village is committed to superior care of the sick, dying and aged. The additions proposed will allow the mission of the Alexian Brothers to expand and reach more individuals.

A, MSNOR, APPUBO

Sincerely,

Nancy M. Birtley, MSN(R), APRN, BC Psychiatric Care and Wellness Specialists

33

CAPITOL OFFICE

State Capitol
201 W. Capitol Avenue
Jefferson City, MO 65101
Toll Free: (866) 342-4905
(573) 751-0220 • Fax: (573) 526-9843
Email: patricia.yaeger@house.mo.gov

DISTRICT ADDRESS

729 Reed Avenue St. Louis, MO 63125 (314) 631-7194



PATRICIA M. YAEGER

State Representative District 96

December 16, 2009

Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee P O Box 570 Jefferson City, MO 65102

RE: Certificate of Need-Alexian Brothers Sherbrook Village

Dear Mr. Piper:

I am writing in support of Alexian Brothers Sherbrook Village's request to expand their facility. The Alexian Brothers have a history of 800 years caring for the aged, sick and dying. They have been in the St. Louis area for 140. Clearly Alexian Brothers is an institution of great repute.

The addition of 12 beds will allow the facility to continue and expand the ministry that they have done so well over the years. This expansion will allow for greater individual dignity and comfort. Each resident will reside in a private room with a private bath. This expansion is also a neighborhood concept as opposed to the current institutional physical plant. This will allow for a higher quality of personal life. When the overall expansion is finished at the Sherbrook Village site, there will be an addition 75 jobs created.

I personally know of the quality of care that is provided at this facility. I had a family member that lived at Sherbrook Village for 3 years. During that time, I know that the facility was often at or close to full capacity. I was impressed with the care they extended to residents and their families. I would urge you to approve Alexian Brothers Sherbrook Village's request to expand their facility. This is one facility that truly cares about the residents and provides excellent care and compassion.

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Sincerely,

Representative Patricia M. Yaeger

District 96

PMY/nel

COMMITTEES

Special Committee on Family Services

Special Committee on Retirement

Joint Committee on Public Employee Retirement



Gerontology Graduate Program

School of Social Work 134 Bellerive Hall (south campus) One University Blvd University of Missouri - St. Louis St. Louis, MO 63121-4499 Office: (314) 516-5280

Fax: (314) 516-5280

December 21, 2009

Thomas Piper Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, Missouri 65102

Re:

Certificate of Need - Alexian Brothers Sherbrooke Village

Dear Mr. Piper:

I am pleased to write this letter of support for the *Certificate of Need* application of Alexian Brothers Sherbrooke Village (ABSV) in St. Louis. It is my understanding that ABSV maintains occupancy levels near or at capacity and wishes to expand hospice services by 12 skilled beds. This makes good sense to me.

ABSV is a very well-managed, multi-level care facility for senior adults with a variety of health and functional needs. I am quite familiar with the facility, as a number of my Gerontology graduate students have completed their practicum experiences there. The ABSV model allows senior adults to age in place, starting in an independent setting, moving to assisted living when necessary, and finally receiving care in a skilled setting when health changes warrant it. End of life care comes next.

The Director of ABSV, Michael Roth, is an innovator and leader in the provision of dignified care for senior adults, especially those in the final days of life. I teach about end of life care, and I know hospice services to be sorely needed in Missouri and other states. While much hospice care happens in the home, many individuals would choose in-patient hospice care to relieve close family of this burden if beds were available. The addition of these 12 beds fits well with local needs, I believe, and ABSV's commitment to quality end of life care (e.g., as evidence by their nationally acclaimed "Highway to Heaven" Program).

Thank you for your kind consideration of this letter and the ABSV application. Best wishes.

Respectfully,

Tom Meuser, PhD

Director, Gerontology Graduate Program

m Meuser

Associate Professor of Gerontology & Social Work

(314) 516-5421 - Office; meusert@umsl.edu

cc: Michael Roth, Director, Alexian Brothers Sherbrooke Village Richard Watters, Lashly & Baer PC Jim Weber Hospice Care Consultant AmHeart Hospice 314-989-9559 (O) 314-707-3304 (C)

Mr. Watters;

My name is Jim Weber, and I have had a long time business as well as a personal relationship with Mike Roth and Sherbrooke Village. I currently oversee 78 skilled and assisted living facilities and find Sherbrooke to be among the very best.

My association with this facility dates back to 1992, and over the years I have seen a lot of changes, each one geared to provide better care.

They are a constant recourse to the community by providing health fairs as well as in-services, all addressing long term and end of life care. I have participated in several of them myself.

When they implemented the "Highway to Heaven" program, I thought what a great idea, not only for the resident and the family but also a way of closure for the staff.

When my Grandmother needed to be placed into a long term care facility I chose Sherbrooke because of the type of care that was always provided to our hospice patients.

When my Grandmother needed to be placed on hospice, Sherbrooke along with AmHeart showed her the respect and dignity she deserved in her final days. They accommodated my family with the support and privacy that was needed.

My father, more recently needed to be placed in a skilled facility for rehab, and again I chose Sherbrooke because of the care I know they provide. My father proved to be a challenge for them because of some of his demands, but again the facility worked with my family and me to provide a plan of care that addressed all his needs. The only time I became concerned, was when my father needed to be admitted to the hospital for treatment. I was not sure he would be able to return to the facility because a room may not be available. Working in hospice I learned the resident and the family become much attached to the caregivers and placing my father in another facility would not have been in his best interest. Working with the facility the issue was resolved. When I heard that Sherbrooke was looking into providing additional beds to be used for hospice, I was happy for them.

Although my experiences were very favorable with the facility, when the time came for my family members to be put on hospice, a hospice room would have made the final days more private for the family.

I have been working for hospice for seventeen years and I learned that dying is a very private time for the person on hospice as well as the family. It is a time best experienced in the company of loved ones and not shared with a roommate.

I am very excited for Mike and Sherbrooke and hope his vision for a hospice wing is realized in the near future.

Respectfully

Im Value



Missouri Association of Homes for the Aging

3412 Knipp Drive ▲ Suite 102 ▲ Jefferson City, Missouri 65109 (573) 635-6244 ▲ Fax (573) 635-6618

December 22, 2009

Mr. Thomas Piper
Missouri Certificate of Need Program
Missouri Health Facilities Review Committee
Department of Health & Senior Services
P.O. Box 570
Jefferson City, MO 65102

Dear Mr. Piper:

It is with great pleasure that I write this letter of support for Alexian Brothers Sherbrooke Village to add twelve skilled nursing beds in the St. Louis area. The Missouri Association of Homes for the Aging is committed to offering Missouri seniors high quality care in the least-restrictive, most appropriate setting. Alexian Brothers mission dating back 800 years furthers that philosophy with the care they offer in a home-like, personal setting that offers a safe, supportive, and flexible environment.

With the national success that Alexian Brothers has had with its "Highway to Heaven" program and "Guide to End of Life Issues" booklet, it is well equipped to offer exceptional service in these new hospice skilled care beds.

Consumer choice is an important corner stone of our association and to our members, as they strive to achieve high standards of care. Therefore, we are supportive of the "neighborhood" model - person centered care approach Alexian uses in this environment.

Alexian Brothers popularity among the elders in the St. Louis area is demonstrated by their continued high occupancy. It is my hope that they will be able to better meet the demands of those citizens by creating these additional hospice rooms to provide care and treatment to individuals in need of end of life care.

Sincerely,

Denise Clemonds

CEO

Cc: Rick Watters





24/7 Helpline 800.272.3900

www.alzstl.org

St. Louis Chapter 9370 Olive Boulevard St. Louis, MO 63132

314.432.3422 p 314.432.3824 f 800.272.3900 t Southeast Missouri Office 2411 Abbey Road Cape Girardeau, MO 63701

573.332.8170 p 573.332.8177 f 800.272.3900 t Illinois Office 222 Goethe Avenue Collinsville, IL 62234

618.346.4073 p 618.346.4075 f 800.272.3900 t

alzheimer's N association°

December 17, 2009

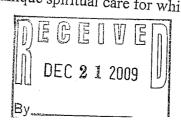
Mr. Thomas Piper Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, Missouri 65102

Re: Letter of Support

Dear Mr. Piper:

I write this letter in support of Alexian Brothers Sherbrooke Village administration's request for a certificate of need review. I have discussed with Mike Roth the vision and plans for additional beds to be made available for a variety of elders. They are sensitive to the needs of those physically capable, early stage married residents with dementia, who need assisted living options that enable them to continue to reside safely with their spouses. They want to expand services to those needing additional rehabilitation services, as well as memory support communities. One of the most important aspects of this plan, for which 12 additional beds are needed per CON approval, is an end of life care program area, where a state of the art, end of life care can be provided with dignity and privacy. The suggested expansion is based on the neighborhood concept as opposed to a medical model allowing for a higher quality of life. It is humbling to note that every 71 seconds someone in America is diagnosed with dementia. In Missouri, 1381 death per year is attributed to Alzheimer's; the fifth leading cause of death for those aged 65 and older.

Alexian Brothers' historical mission and commitment is to provide the elderly with dignity during life and through the dying process. They are leaders in seeing the need to do this in the ways most supportive of families and least amount of disruptive to a room mate residing with the terminally ill person. Approval of the 12 beds allows persons to have quality time with families during their last remaining days. It is a very person centered and innovative response to customer needs. The new setting will allow for greater individual dignity and comfort. Each resident will have a private room and bath, sharing common spaces (dining, great room, Chapel, beauty shop) with others in the neighborhood. They and their families will have access to the unique spiritual care for which



Executive Committee Chair Jan Kraemer Vice Chair, Treasurer I. Jack Challis Io Ann Arnold Aorton Brown Michael J. Hughes usan Kovacs obert M. Ventimiglia

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December 18, 2009 Mr. Thomas Piper Certificate of Need program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson city, MO 65102

Mr. Piper,

I have recently received information that Alexi an Brothers/Sherbrook Village is attempting to expand and part of this project includes a 12 bed palliative care unit accessible to hospice patients. I want to express strongly that this is a much needed service in the St. Louis community and that the Alexi an Brothers have a proven track record in providing excellence in patient care to people facing a terminal illness. Over 4,700 patients are enrolled in hospice annually in the St. Louis and St. Louis County area. Over 50% of all deaths continue to occur in St. Louis area hospitals and many of them received care through emergency rooms and hospitals because alternatives are not available. More and more, hospice is being accepted as a alternative to care and Alexian Brothers have worked with hospice for at least 20 years to provide this care.

As a reference I have served on several state wide committees including the Missouri Medicaid Hospice ad.hoc. as Committee Chair and on the Missouri Bureau of Home Health and Senior Services with Lois Kollmeyer and now Lisa Coots over a 25 year period. Both of these committees involve hospice services.

I have worked in hospice for 28 years and with the Alexi an Brothers Healthcare system for at least 20 of those years. Theirs is a mission of caring for the elderly, the sick and the persons facing a terminal illness. The Alexian Brothers has chosen to work with many different hospice programs allowing patients and families to choose their own providers. In addition to this, the Alexians have published an exceptional informational guide about end of life care in meeting the needs of these patients and created programs to honor those people who have died while under their care. Their "Highway to Heaven" program embraces the value individuals who have died and offers a unique opportunity to provide dignity to them and support to their families.

Alexian Brothers Sherbrook Village, a leader in healthcare community, is at or near capacity at all times and this expansion and type of care would provide access for hospitals to move patients out of the acute level of care and access more appropriate palliative and supportive care. Having patients in a unit like this will assist patient and families in making important end of life care decisions when aggressive hospital care can no longer offer a return to a higher level of health, possibly preventing inappropriate

hospitalizations. This new setting would allow for greater individual dignity and comfort for the patient and the family, allowing for more privacy and autonomy.

The need for quality end of life care is growing and will continue to grow as the baby boomers enter their golden years. Alexian Brothers and many health care providers have recognized that alternatives to aggressive treatment in hospitals are needed especially in the last 2 months of life. Allowing Sherbrook to develop this unit with support of the community and community providers does two things. It allows access to a compassionate approach to care that is needed in the immediate and surrounding community and provides a more appropriate approach to end of life care instead or expensive emergency room visits and hospitalization. Sincerely,

Matt Brauss RN, CHPN

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee P.O. Box 570 Jefferson City, MO 65102

Dear Mr. Piper,

I would like to take a moment to express my support for the expansion of Alexian Brothers Sherbrooke Village (ABSV) new facility that is being proposed to you. As a member of the South St. Louis Community, I look forward to the potential of new jobs added to the area. This would not only benefit those who need work, but local businesses' as well.

I just recently helped place a long-time friend in the Residential Care Facility at ABSV. Due to the lack of availability, he could not move in at the time he wanted, fortunately for him it was not an emergent matter and he was able to wait until a room became available. However, some need placement right away and families are at a loss as to what to do and either place their loved one in a facility farther away from home or one less then desirable.

As the younger population ages, the need for private rooms and a "neighborhood" setting rather then a traditional "nursing home" setting is more appropriate since more and more people are staying in their homes as long as they can. The transition from home to a nursing home is not easy on the resident or the family. Several years ago I placed my aunt at ABSV. Having her move from her home to sharing a room with a total stranger with only a few of her personal belongings was traumatic to her. It is so easy to lose your dignity the minute you walk in the door, and a new facility with a neighborhood like setting with private rooms would help the resident get quality care with the respect they deserve. When she reached her final days and was on hospice, she required additional care and staff were in and out of her room constantly, with private hospice rooms the family and staff can spend their final hours with their loved one without disrupting the roommate and their visitors. The thought and consideration in the planning of this facility is a win-win situation for everyone involved and I hope this expansion will be approved.

Sincerely, Trank K. Spinner

Infection Control, Inc. 36 Pilot Hill Drive St. Peters, Missouri 63376

December 15, 2009

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health facilities Review Committee Post Office Box 570 Jefferson City, Missouri 65102

Mr. Piper,

I am an Infection Control Consultant and have worked with many Long Term Care, Skilled Nursing, Assisted Living and Independent Living Facilities in the State of Missouri over the past 22 years. I try very hard to partner with organizations who share my same value to care for the elderly the same way I would want my own family cared for as they meet the challenges of aging.

I have worked with Alexian Brothers Sherbrooke Village for the past 20 plus years since they opened because they meet my requirement of care and compassion, treating the resident as a human being and honoring their dignity as they assist them in their aging process. Over these years I have seen many examples of these values in the programs they provide to their residents and families and welcome the opportunity to be part of this organization. I have witnessed Mike Roth and his staff be leaders in the industry as they developed programs to meet the needs of the elderly. They have pioneered programs for Safety in the Home, to assist the elderly to safely stay in their home as long as possible. They have responded to the needs of families by developing programs to assist them in choosing a home for their loved one, when in home care is no longer an option. They continue to provide care to the elderly, not in an institutionalized setting where the patient is faceless and known by their room number. They strive to make the facility a home setting, embracing culture change and establishing neighborhoods where the resident moves in and becomes an integral part of the community. Residents are given the opportunity to make decisions about their own care and living arrangements and these are honored by the staff. This is the home I would seek for my own elderly parents when they can no longer stay in their own home.

Over the years, one thing that has set Sherbrooke Village above my other facilities is that it has remained full and even has waiting lists. I have witnessed the opposite in most of my other facilities. I think this speaks to their care and reputation in the community. In order to meet the growing need for more beds, they are seeking approval to add 12 skilled beds to accommodate this need. The new beds will provide that home setting for those seniors unable to stay in their own home. As you consider this application, I too hope you will consider all the

good work the staff at Sherbrooke Village does on a daily basis to care for our elderly with care, compassion and dignity in a non institutional setting. This is what I look will look for when the time comes for my parents to leave their own home, and is an unmet need in this community at present.

Thank you for your consideration of the worthy project.

Sincerely,

Patricia Lynn Meyer

Patricia Lynn Meyer, BSN, MPH, CIC

President,

Infection Control, Inc.

The Went Step/ElderAssist®

Elder Care Consultants

December 22, 2009

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, MO 65102

Re: Alexian Brothers - Sherbrooke Village

4005 Ripa Avenue St. Louis, MO 63128

Dear Mr. Piper:

For the last 13 years, I have helped older people and those with disabilities locate appropriate housing. One lovely woman was able to move into Sherbrooke's Residential Care facility and remained there for five years. I assisted this woman during that time and cannot speak highly enough about the care she received. And, the ministry of the Alexian Brothers for those who are dying was a blessing to this woman, her son, and her family.

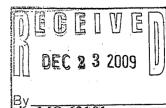
Sherbrooke's proposed new housing would have a home-like environment with a neighborhood concept. The private rooms, away from the normal institutional setting, would provide an even higher quality of life for older people.

Unfortunately, almost every time I call Sherbrooke looking for a bed in the nursing unit, I am told there is no availability. There is definitely a need for more beds at Sherbrooke Village.

Sincerely,

Diane M. Smith MS CMC Geriatric Care Manager

cc: Mr. Richard Watters, Lashly & Baer PC, 714 Locust, St. Louis, MO 63101



December 18, 2009

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, Missouri 65102

Dear Mr. Piper:

It is with great enthusiasm that I write in support of Alexian Brothers Sherbrooke Village and their certificate of need application for an expansion. I have been associated with the Alexian Brothers and this facility for more than 20 years both as physical therapy practitioner and a health professions educator.

Sherbrooke Village is a leader in rehabilitation services and comprehensive senior living services. The Alexian Brothers mission and dedication to the elderly and to those who are ill is practiced through guaranteeing the quality of life of every individual. This includes a continuum of services from wellness to the end of life. The rehabilitation services rival rehabilitation hospitals in discharge to home outcomes.

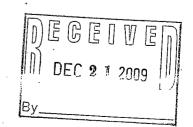
As we baby boomers begin to age, clearly there will be a need for more rehabilitation and long term care living facilities. As a leader and an innovator, Sherbrooke Village has demonstrated their ability to provide quality services which respect individual dignity. The proposed design of their expansion and the "neighborhood" concept allows for privacy in individual rooms and a truly "like home" atmosphere. Today's seniors demand this type of facility and services.

In summary, Alexian Brothers Sherbrooke Village deserves your approval to expand their ability to serve our community. I urge you and your committee to approve their certificate of need application.

Sincerely,

Charles J. Gulas, PhD, PT, GCS

Dean, School of Health Professions



December 22, 2009

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee Post Office Box 570 Jefferson City, MO 65102

Re: Alexian Brothers - Sherbrooke Village

4005 Ripa Avenue St. Louis, MO 63128

Dear Mr. Piper:

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Sherbrooke's proposed new housing would have a home-like environment with a neighborhood concept. The private rooms, away from the normal institutional setting, would provide an even higher quality of life for older people.

Unfortunately, almost every time I call Sherbrooke looking for a bed in the nursing unit, I am told there is no availability. There is definitely a need for more beds at Sherbrooke Village.

Sincerely,

Diane M. Smith MS CMC Geriatric Care Manager

cc: Mr. Richard Watters, Lashly & Baer PC, 714 Locust, St. Louis, MO 63101



MEMBER FDIO

L. Alec Blanc III

First Bank, 135 N Meramec, Clayton, MO 63105 Phone: 314,889,1055

Mr. Thomas Piper

Certificate of Need Program Missouri Health Facilities Review Committee P.O. Box 570 Jefferson City, MO 65102

Dear Mr. Piper

I am writing in support of the Certificate of Need application for 12 skilled nursing beds to be added at Alexian Brothers Sherbrooke Village. The Alexian Brothers have been part of the St. Louis community since 1869. Alexian Brothers Sherbrooke Village has been an active south county community member for 20 years. The Alexian Brothers' Ministries in St. Louis consist of skilled care, residential care, low income housing and the only PACE program in the state serving the elderly. The Ministries provide care and service to individuals of all economic levels.

The proposed expansion is based on the neighborhood concept as opposed to the current institutional model allowing for greater individual dignity, comfort and a higher quality of life for the residents. Each resident will have a private room and bath, sharing common spaces (dining, great room, Chapel, beauty shop) with others in the neighborhood.

The I2 proposed beds are intended for hospice care. Alexian Brothers Sherbrooke Village is well known for its commitment to end of life care, including the development of "Highway to Heaven"; (a ceremony recognizing dignity of the person at the end of life) and the "Guide to End of Life Issues" booklet which has received national recognition.

I have personally been familiar with this organization for approximately 10 years, including nearly a year in which my father-in-law was a resident at Sherbrooke Village. I cannot speak highly enough about the quality of care he received from the capable and caring staff at this facility. As a banker to health care providers I have the opportunity to see many of our state's nursing facilities. Very few rise to the level of Sherbrooke Village. This explains why the facility maintains occupancy levels often at or close to full capacity. These additional beds would help meet a community need. Based on my personal and professional experience, I urge the committee's support of this application.

Sincerely,

L. Alec Blanc III
Senior Vice President & Group Manager
Healthcare Banking

First Bank

12/18/2009

Cc: Rick Watters, Lashly & Baer PC

Mr. Thomas Piper, Director

Missouri Health Facilities

Jefferson City, Mo.

Dear Mr. Piper.

Alexian Brothers Sherbrooke Village has submitted an application to expand their ministry on Ripa Ave., St. Louis, Mo. This expansion would further meet the needs of the community. Expanded health care for Seniors, as well as others in the community, is a sorely needed service in our society.

I serve as a volunteer Ombudsman at this facility as well as a member of the Board of Directors for the Long Term Care Ombudsman Program. Also, my Mother was a resident at Sherbrooke for six years. I was always very satisfied with the care she received and the professionalism of the staff. If this were not my sincere and honest feelings I would not be sending you this letter of endorsement.

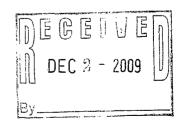
Thanks for your review and consideration for approval of this most worthwhile project!

Gratefully,

Charles DiMercurio

Ombudsman and Director

Long Term Care Ombudsman Program



Charles Di Mercurio 4923 Brunston Dr. Saint Louis, MO 63128

Divider III. Service Specific Criteria and Standards.

1. For ICF/SNF beds, address the population-based bed need methodology of fifty-three (53) beds per one thousand (1,000) population age sixty-five (65) and older.

Unmet Need =
$$[(R \times P) - U]$$

 $R = 53/1,000$
 $P = 2015$ population age 65 and older in 15 mile radius = 167,504
 $U = \#$ of RCF and ALF beds in 15 mile radius = 10,490 (facilities list attached).
 $[(.053 \times 167,504) - 10,490] = -1612$ (surplus)

This formula fails to capture the true need for this project. The occupancy at Applicant's skilled nursing facility is consistently over 90%--and Applicant's end-of-life care beds are usually full. Thus, the 15 mile radius does not accurately depict Applicant's service area. The great majority (approximately 85%) of Applicant's residents come from zip codes 63125, 63129, 63123, 63128, 63109, 63116, 63111, 63126, and 63119 (see service area map attached in Divider II). Applicant proposes using this actual service area for the need analysis, rather than the arbitrary 15 mile radius:

The 65 and over population for Applicant's actual 9 zip code service area is 58,216.

There are 2197 SNF and ICF beds located within this service area.

This revised service area shows a need for skilled nursing beds in Applicant's service area, which is consistent with Applicant's high occupancy:

$$(.053 \times 58,216) - 2197 = 888$$
 beds needed

2. For RCF/ALF beds, address the population-based bed need methodology of twenty-five (25) beds per one thousand (1,000) population age sixty-five (65) and older.

Not Applicable.

3. Document any alternate need methodology used to determine the need for additional beds such as LTCH, Alzheimer's, mental health or other specialty beds.

The alternative need methodology discussed above is appropriate for end-of-life beds, as Applicant's experience shows that its end-of-life residents reside primarily within the 9 zip codes closest to the facility.

4. For any proposed facility which is designed and operated exclusively for persons with acquired human immunodeficiency syndrome (AIDS), provide information to justify the need for the type of beds being proposed.

Not applicable.

Alexian Brothers SNF/ICF beds within 15 miles of project site:

Facility	# SNF Beds	# ICF Beds
South County Nursing Home	153	
Woodland Manor Nursing Center	178	
Abbey Care Center	126	
Alexian Bros Sherbrooke Village	120	
Ashfield	53 (approved)	
Barnes Jewish Extended Care	120	
Bellefontaine Gardens	96	
Bentleys Extended Care	72	
Bethesda Dilworth	430	
Bethesda Southgate	180	
Big Bend Woods	176	
Brooking Park	97	
Brooking Park Hlth Care Center	30 (approved)	
Cedars at the JCA	230	
Christian Care Home	168	
Community Care Center of Lemay	105	
Crescent Care	264 (approved)	
Creve Coeur Manor	149	
Delmar Gardens on the Green	180	
Delmar Gardens South	250	
Delmar Gardens West	330	
Delmar Gardens of Creve Coeur	152	
Delmar Gardens of Meramec Valley	190	<u> </u>
Des Peres Healthcare and Rehab	111	
Dolan RCC Conway Manor		9
Fleser Nursing Center		60
Friendship Village of South County	118	
Garden View Care Center at Dougherty Ferry	120	
Green Park	188	
Heritage Care	120	
Lutheran Convalescent home	234	
Lutheran Senior Services at Meramec Bluffs	88	
Manor Grove	117	
Mari de Villa	224	
Mary Culver Home		28
Mary Queen and Mother	230	
McKnight Place	79	
Mother of Good Counsel	114	
Nazareth	140	
NHC Hcare, Maryland Heights	220	

NHC Healthcare, Town and Country	282	
Normandy	116	
North Valley	94	
Oak Knoll	43	23
Parc Provence	130	
Peace Haven		42
Rosewood Care	120	
South Co Senior Care	216 (approved)	
St Agnes Home	` * *	150
St John's Mercy	120	
St John's Place	94	
Sunrise Des Peres		102
Sunrise on Clayton		90
Sunset Hills	167	
U-City Forest Manor	. 120	
West County Care Center	137	
Alexian Bros Landsdowne	180	
Avalon Garden	77	
Beauvais Manor	184	
Bernard	141	
Carrie Elligson Geitner	120	
Charless	30	
Delhaven	156	
Dutchtown	120	
Garrison	90	
Grand Manor	120	
Hillside Manor	208	
Life Care Center of St Louis	100	
Little Sisters of the Poor		67
Northview	310	
Oak Park	120	
Parkside	168	
Riverview	130	
Springplace	28	
St Louis Altenheim		46
Total	9873	617
TOTAL	10	490

Divider IV. Financial Feasibility Review Criteria & Standards.

1. Document that the proposed costs per square foot are reasonable when compared to the latest RS Means Construction Cost data.

Applicant's proposed construction costs per square foot are slightly higher than the latest RS Means Construction Cost data for nursing homes in the St. Louis area, because the project requires four nurses' stations, four soiled utility rooms, four clean linen rooms, and four clean utility rooms. In addition, private rooms and private bathrooms, which are demanded by the current market and provide more dignity and privacy for end-of-life patients, raise construction costs.

2. Document that sufficient financing is available by providing a letter from a financial institution or an auditor's statement indicating that sufficient funding is available.

Please see attached excerpt from Applicant's most recent financial statements, showing \$346,036,000 in unrestricted net assets (and \$23,734,000 in cash and cash equivalents).

3. Provide Service-Specific Revenues and Expenses (Form MO 580-1865) projected three (3) years beyond completion.

Attached.

4. Document how patient charges were derived.

Patient charges were based on historical and current charges at Applicant's existing facility, as adjusted to correlate with the expansion and programmatic changes.

5. Document responsiveness to the needs of the medically indigent.

Since Alexian Brothers Sherbrooke Village opened in 1991, a resident has never been discharged due to their assets being depleted. A copy of the Alexian Brothers Health System Charity Care policy is attached.

ALEXIAN BROTHERS HEALTH SYSTEM AND SUBSIDIARIES

Consolidated Financial Statements and Consolidating Schedules

December 31, 2008 and 2007

(With Independent Auditors' Report Thereon)

ALEXIAN BROTHERS HEALTH SYSTEM AND SUBSIDIARIES

Consolidated Balance Sheets

December 31, 2008 and 2007

(In thousands)

Assets		2008	2007
Current assets: Cash and cash equivalents	\$	23,734	6,263
Receivables: Patient and resident accounts, less allowance for uncollectible accounts of approximately \$32,900 in 2008 and \$33,700 in 2007		108,577	102,938
Other		13,111	11,641
Total receivables		121,688	114,579
Assets limited as to use – required for current liabilities Inventory of supplies Prepaid expenses	. <u></u>	7,062 11,871 6,903	6,947 11,781 5,941
Total current assets		171,258	145,511
Assets limited as to use: Board-designated Trustee-held funds Assets held by captive insurance company		291,665 17,609 66,863	312,639 11,894 62,561
Total assets limited as to use		376,137	387,094
Less assets limited as to use - required for current liabilities		7,062	6,947
Noncurrent assets limited as to use		369,075	380,147
Land, buildings, and equipment, net	_	520,436	502,134
Other assets: Deferred finance charges, net Land held for future development, at cost Excess of purchase price over net assets acquired, net Restricted assets Notes, deposits, and other		12,208 10,211 79,654 11,344 11,976	10,761 10,211 84,776 11,944 11,874
Total other assets	_	125,393	129,566
Total assets	\$ _	1,186,162	1,157,358

[.] See accompanying notes to consolidated financial statements.

Liabilities and Net Assets	 2008	2007
Current liabilities:		
Current installments of long-term debt	\$ 20,427	9,205
Long-term debt subject to short-term remarketing arrangements	159,681	162,730
Accounts payable	41,896	21,992
Accrued expenses	86,347	77,603
Estimated payables under third-party reimbursement programs	60,550	48,440
Other	 12,113	10,428
Total current liabilities	381,014	330,398
Deferred accommodation fees and deposits	49,963	50,340
Reserve for outstanding insurance losses	77,009	75,272
ong-term debt, excluding current installments	280,850	242,551
Other	 39,946	9,149
Total liabilities	828,782	707,710
Net assets:	 	
Unrestricted	346,036	437,704
Temporarily restricted	9,742	10,245
Permanently restricted	 1,602	1,699
Total net assets	 357,380	449,648
Commitments and contingencies		
30		

Total liabilities and net assets	\$ 1,186,162	1,157,358



Certificate of Need Program

SERVICE-SPECIFIC REVENUES AND EXPENSES

Historical Financial Data for Latest Three Years plus Projections Through Three Years Beyond Project Completion

Use an individual form for each affected service with a sufficient number of copies of this form to cover entire	period,	Year 2008	2009
and fill in the years in the appropriate blanks.)	2007	2008	2009
Amount of Utilization:*	58,521	56,348	56,762
Revenue:			
Average Charge**	\$162	\$181	\$188
Gross Revenue	\$9,458,749	<u>\$10,173,068</u>	\$10,696,799
Revenue Deductions	0	0	0
Operating Revenue	9,458,749	10,173,068	10,696,799
Other Revenue	1,331,000	-2,450,000	1,692,000
TOTAL REVENUE	\$10,789,749	\$7,723,068	\$12,388,799
Expenses:			
Direct Expense			
Salaries	4,461,000	4,828,000	5,160,000
Fees	0	0	0
Supplies	2,465,000	2,766,000	2,893,000
Other	0	0	0
TOTAL DIRECT	\$6,926,000	\$7,594,000	\$8,053,000
Indirect Expense			
Depreciation	494,000	496,000	506,000
Interest***	0	0	0
Overhead****	0	0	0
TOTAL INDIRECT	\$494,000	\$496,000	\$506,000
TOTAL EXPENSE	\$7,420,000	\$8,090,000	\$8,559,000
NET INCOME (LOSS):	\$3,369,749	-\$366,932	\$3,829,799

^{*} Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

MO 580-1865 (08/06)

^{**} Indicate how the average charge/procedure was calculated.

^{***} Only on long term debt, not construction.

^{****} Indicate how overhead was calculated.



Certificate of Need Program

SERVICE-SPECIFIC REVENUES AND EXPENSES

Historical Financial Data for Latest Three Years plus Projections Through Three Years Beyond Project Completion

(Use an individual form for each affected service with sufficient number of copies of this form to cover entir	e period,	Year	
and fill in the years in the appropriate blanks.)	2011	2012	2013
Amount of Utilization:*	67,708	75,920	78,324
Revenue:			
Average Charge**	\$204	\$219	\$232
Gross Revenue	\$13,812,432	\$16,626,480	\$18,171,168
Revenue Deductions	0	0	0
Operating Revenue	13,812,432	16,626,480	18,171,168
Other Revenue	117,532	117,532	117,532
TOTAL REVENUE	\$13,929,964	\$16,744,012	\$18,288,700
Expenses:			
Direct Expense			
Salaries	7,950,728	8,830,086	9,139,140
Fees	0	0	0
Supplies	3,565,856	3,948,895	4,216,702
Other	0	0	0
TOTAL DIRECT	\$11,516,584	\$12,778,981	\$13,355,842
Indirect Expense		·	
Depreciation	1,142,229	1,156,229	1,171,229
Interest***	0	0	0
Overhead****	0	0	0
TOTAL INDIRECT	\$1,142,229	\$1,156,229	\$1,171,229
TOTAL EXPENSE	\$12,658,813	\$13,935,210	\$14,527,071
NET INCOME (LOSS):	\$1,271,151	\$2,808,802	\$3,761,629

^{*} Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected:

MO 580-1865 (08/06)

^{**} Indicate how the average charge/procedure was calculated.

^{***} Only on long term debt, not construction.

^{****} Indicate how overhead was calculated.

Alexian Brothers Health System Older Adult Ministries Policies and Procedures

Subject: Charity Care Original Issue: 11/01/98
Department: Accounting Reviewed: 12/31/03
File Name: Revised Accounting Policies Last Updated: 01/01/02

POLICY: Consistent with Alexian's philosophy of providing care to all in need, charity care is provided to individuals who have received or are receiving services but are unable to pay for these services. Charity Care is granted based upon a mutual understanding between the facility and the individual who cooperate in exploring alternate methods of reimbursement before charity care is approved.

PROCEDURES:

Charity Care

- Charity care is distinguished from bad debt by the willingness but inability of the individual to pay, versus bad debt, which is the ability but unwillingness to pay.
- Services provided and reimbursed based on contractual rates (i.e. Medicare, Medicaid, Managed Care) do not constitute charity care.
- Write off of amounts billed to a third party and subsequently denied due to untimely billing or error in submissions/approval process constitutes a bad debt rather than charity care.
- Basic criteria for determination of inability to pay will be based upon a resident's lack of financial assets (provided that voluntary transfer of assets in a manner that impaired the ability to pay for services has not occurred) and income.



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January 20, 2010

MARGARET C. SCAVOTTO
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Licensed in Missouri and Illinois

Donna Schuessler Health Planning Specialist Missouri Health Facilities Review Committee VIA EMAIL

Re: #4452 NS: Alexian Brothers Sherbrooke Village

\$2,730,000, Add 12 SNF Beds

Response to Request for Additional Information

Dear Donna:

In your letter dated January 7, 2010, you requested some additional information about the above-referenced project:

- Please expand the project description and discuss in greater detail how the expansion would be accomplished. For example, the application states that the proposed additional beds would be located in "Neighborhood 3."
- The schematic should clearly show where the new construction is to occur. It should also show where each of the proposed beds would be located.

Response: The 12 additional end-of-life care skilled nursing beds will be located in an addition to the existing facility. The attached schematic drawing shows the addition to the facility. This addition also includes construction related to projects 4454 RS and 4453 NP (expedited applications previously filed). The 12 SNF beds involved with this project, #4452 NS, will be located on Neighborhood 3 (shown on the attached schematic drawing). These beds, in Neighborhood 3, are in studio, 1-bedroom, and private apartments. The 12 end-of-life care bed expansion does not involve renovations to the existing structure.

• What other facility in the community has a similar structure to the applicant's facility as referenced on page 10?

Response: Fern and Russell F de Greeff Hospice House, on the St. Anthony's Medical Center campus.



• Please provide projected utilization for 2010. Also provide 2010 financial data on the Service-Specific Revenues and Expenses form.

Response: A Service-Specific Revenues and Expenses form showing 2010 financial data is attached. As indicated on this form, utilization for 2010 is 56,940.

• Explain the drop in utilization from 2007 to 2008 and the net loss for 2008.

Response: Utilization decreased from 58,521 in 2007 to 56,348 in 2008—by only one percent (1%). This slight decrease is due to unexpectedly high utilization in 2007. The net loss in 2008 is attributable to investment losses in 2008.

Please let me know if I can be of further assistance. Thank you for your time.

Very truly yours,

Margaret C. Scavotto

MCS/dk

Enclosures

HKWArchitects
08.007.00 October 27, 2009

SENIOR LIVING FACILITY SCHEMATIC DESIGN

Scale: 1/32" = 1'-0"



Historical Financial Data for Latest Three Years plus Projections Through Three Years Beyond Project Completion

Use an individual form for each affected service with sufficient number of copies of this form to cover entir and fill in the years in the appropriate blanks.)		Year 20??	20??
Amount of Utilization:*	56,940		0
Revenue:			
Average Charge**	\$195	\$0	\$0
Gross Revenue	\$11,089,065	\$0	\$0
Revenue Deductions	0	0	0
Operating Revenue	11,089,065	0	0
Other Revenue	812,214	0	0
TOTAL REVENUE	\$11,901,279	\$0	\$0
Expenses:			
Direct Expense			
Salaries	5,393,179	0	0
Fees	0	0	0
Supplies	3,163,451	0	0
Other	0	0	0
TOTAL DIRECT	\$8,556,630	\$0	\$0
Indirect Expense			
Depreciation	560,369	0	0
Interest***	0	0	0
Overhead****	0	0	0
TOTAL INDIRECT	\$560,369	\$0	\$0
TOTAL EXPENSE	\$9,116,999	\$0	\$0
NET INCOME (LOSS):	\$2,784,280	\$0	\$0

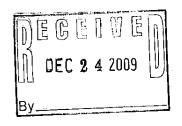
^{*} Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

^{**} Indicate how the average charge/procedure was calculated.

^{***} Only on long term debt, not construction.

^{****} Indicate how overhead was calculated.

Mr. Thomas Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee P.O. Box 570 Jefferson City, MO 65102



Dear Mr. Piper,

I would like to take a moment to express my support for the expansion of Alexian Brothers Sherbrooke Village (ABSV) new facility that is being proposed to you. As a member of the South St. Louis Community, I look forward to the potential of new jobs added to the area. This would not only benefit those who need work, but local businesses' as well.

I just recently helped place a long-time friend in the Residential Care Facility at ABSV. Due to the lack of availability, he could not move in at the time he wanted, fortunately for him it was not an emergent matter and he was able to wait until a room became available. However, some need placement right away and families are at a loss as to what to do and either place their loved one in a facility farther away from home or one less then desirable.

As the younger population ages, the need for private rooms and a "neighborhood" setting rather then a traditional "nursing home" setting is more appropriate since more and more people are staying in their homes as long as they can. The transition from home to a nursing home is not easy on the resident or the family. Several years ago I placed my aunt at ABSV. Having her move from her home to sharing a room with a total stranger with only a few of her personal belongings was traumatic to her. It is so easy to lose your dignity the minute you walk in the door, and a new facility with a neighborhood like setting with private rooms would help the resident get quality care with the respect they deserve. When she reached her final days and was on hospice, she required additional care and staff were in and out of her room constantly, with private hospice rooms the family and staff can spend their final hours with their loved one without disrupting the roommate and their visitors. The thought and consideration in the planning of this facility is a win-win situation for everyone involved and I hope this expansion will be approved.

Sincerely,

Frank K. Spinner